

DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

ATTORNEY DOCKET NO. 70006400-1

As a below named inventor, I hereby declare that:

My residence/post office address and citizenship are as stated below next to my name;

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and

joint inventor (if plural nampatent is sought on the inventor System And Method For Ma	es are listed below) of the ntion entitled:		ich is claimed and for which a			
the specification of which is	attached hereto unless the	e following box is ch	ecked:			
•	2001 as US Applic	ation Serial No. or PC	CT International Application			
	ended by any amendment	t(s) referred to abov	e above-identified specification, e. I acknowledge the duty to FR 1.56.			
Foreign Application(s) and/or Claim						
I hereby claim foreign priority ben- inventor(s) certificate listed below filing date before that of the applica-	and have also identified below an	ny foreign application for p	any foreign application(s) for patent or patent or inventor(s) certificate having a			
COUNTRY	APPLICATION NUMBER	DATE FILED	PRIORITY CLAIMED UNDER 35 U.S.C. 119			
			YES: NO:			
			YES: NO:			
Provisional Application I hereby claim the benefit under Title 35, United States Code Section 119(e) of any United States provisional application(s) listed below:						
	APPLICATION SERIAL NUMBER	FILING DATE				
,						
U. S. Priority Claim						
I hereby claim the benefit under Title 35, United States Code, Section 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code Section 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, Section 1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application: APPLICATION SERIAL NUMBER FILING DATE STATUS (patented/pending/abandoned)						
POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith: Customer Number 022879 Place Customer Number Bar Code Label here						
Send Correspondence to:		Direct Telephone	· Calls To:			
HEWLETT-PACKARD COMPAN		Edward Maker II	1			
P.O. Box 272400 Fort Collins, Colorado 80527-2400		(650) 857-5143				
I hereby declare that all sta	stements made herein of r	ny own knowledge a	are true and that all statements			
made on information and be the knowledge that willful	elief are believed to be true alse statements and the li 1 of Title 18 of the United	e; and further that th ke so made are puni d States Code and th	ese statements were made with shable by fine or imprisonment, aat such willful false statements			
Full Name of Inventor: Lakshmi	Kutty CHEENIYIL	Citizenship: <u>In</u>	Citizenship: India			
Residence: No. 84, 4th Main, 7th Cross, J.P. Nagar - 3 Phase, Bangalore 560078, India						
Post Office Address: Same as residence						
C- Labohini	bulty.	19_Ax	ril 2001			
Inventor's Signature		Date				

DECLARATION AND POWER ATTORNEY FOR PATENT APPLICATION (continu d)

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Full Name of # 2 joint inventor:	Srivatsa KRISHNASWAMY		Citizenship: India
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Post Office Address:	Same as residence		
	K~>	<u>-</u>	19th April 2001
Inventor's Signature		Date	
5 H.M of # 2 inlet inventors	_		Citizenship:
Full Name of # 3 joint inventor:	·		Citizenship:
Residence:			
Post Office Address:			
Inventor's Signature		Date	
Full Name of # 4 joint inventor:	:		Citizenship:
Residence:			
Post Office Address:			
Inventor's Signature		 Date	A-200
		Date	
Full Name of # 5 joint inventor	:		Citizenship:
Residence:			
Post Office Address:			
Inventor's Signature		Date	
Full Name of # 6 joint inventor		··-	Citizenship:
Residence:			- Aller - I
Post Office Address:			
Inventor's Signature		Date	
			•
Full Name of # 7 joint inventor	· r:		Citizenship:
Residence:		•	
Post Office Address:	· · · · · · · · · · · · · · · · · · ·		
			
Inventor's Signature		Date	
5.00 No / # O	_		Cisinopolain
Full Name of # 8 joint inventor	r:		Citizenship:
Residence:			
Post Office Address:			A Secretary Control of the Control o
Inventor's Signature		Date	